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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
Substitute for Form PTO-1360
(For use with Form PTO/SB/06)

Application Number 10/722,114

Filing Date

Applicant(s)

*May be used for additional claims or amendments

BEST AVAILABLE COPY

CLAIMS	AS FILED 1-14-05		AFTER FIRST AMENDMENT 8-10-05		AFTER SECOND AMENDMENT 12-7-05			1-14-05		8-10-05		12-7-05	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1							51						
2							52						
3							53						
4							54						
5							55						
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7							57						
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37							87						
38							88						
39							89						
40							90						
41							91						
42							92	1		1		1	
43							93					1	
44							94					1	
45							95					1	
46							96					1	
47							97					1	
48							98					1	
49							99					1	
50							100						
Total Indep							Total Indep	2		2		2	
Total Depend							Total Depend	0		0		8	
Total Claims							Total Claims	2		2		10	